## CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

## STATEMENT OF ECONOMIC INTERESTS KLULIV Pate Received CITY CLERK COVER PAGE WING BEACH, CALIT

11 MAR 23 PM 12: 31

Please type or print in ink.	LI HAIL 23	1 LU15: 31
NAME OF FILER (LAST)	(FIRST)	(MIDDLE)
Johnson	James	,
1. Office, Agency, or Court		
Agency Name		
City Officials - City Council		
Division, Board, Department, District, if applicable	Your Position	
	Councilmember - 7th District	A C
► If filing for multiple positions, list below or on an attachment.		
		i iii a
Agency:	Position:	7 000
2. Jurisdiction of Office (Check at least one box)		
State	☐ Judge (Statewide Jurisdiction)	
Multi-County	County of	<u> </u>
⊠ City of Long Beach	Other	) O <u>X</u>
· · · · · · · · · · · · · · · · · · ·		
3. Type of Statement (Check at least one box)	<u>.</u>	
Annual: The period covered is January 1, 2010, through December 3 2010.	<ol> <li>Leaving Office: Date Left//</li></ol>	
The period covered is 07 20 10, through December 31	·	through the date of
2010.	leaving office.	through the date of
Assuming Office: Date	○ The period covered is//_	, through the date
<b>,</b>	of leaving office.	
Candidate: Election Year Office sought, if dif	fferent than Part 1:	
4. Schedule Summary		
-	Total number of pages including this cover page:	2
		•
Schedule A-1 - Investments – schedule attached  Schedule C - Income, Loans, & Business Positions – schedule attached  Schedule D - Income – Gifts – schedule attached		
Schedule B - Real Property – schedule attached	Schedule E - Income - Gifts - Travel Payments	
-or-		
☐ None - No reportable intere	ests on any schedule	
·		
herein and in any attached schedules is true and complete. I acknowledge	this is a	
I certify under penalty of perjury under the laws of the State of Californ		
2/2/11		
Date Signed S	ignatur	
(month, day, year)		
	FPPC	

## **SCHEDULE A-1** Investments

## Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 70	
Name	`\
James Johnson	

NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY	
Capital One Financial	Alcoa Inc.	
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY	
Financial Services	Metals	
FAIR MARKET VALUE	FAIR MARKET VALUE	
	<b>☒</b> \$2,000 - \$10,000 ☐ \$10,001 - \$100,000	
S100,001 - \$1,000,000 Over \$1,000,000	[ \$100,001 - \$1,000,000	
NATURE OF INVESTMENT	NATURE OF INVESTMENT    Stock ☐ Other	
(Describe)	(Describe)	
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:	
, , 10 , , , 10	, , 10 , , 10	
ACQUIRED DISPOSED	ACQUIRED DISPOSED	
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY	
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY	
<del></del>		
FAIR MARKET VALUE	FAIR MARKET VALUE	
\$2,000 - \$10,000	\$2,000 - \$10,000	
\$1,000,001 - \$1,000,000 Over \$1,000,000	[ \$100,001 - \$1,000,000	
NATURE OF INVESTMENT	NATURE OF INVESTMENT	
Stock Other (Describe)	Stock Other (Describe)	
Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499	
○ Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)	
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:	
, , 10 , , 10	, , 10 7 , , 10	
ACQUIRED DISPOSED	ACQUIRED DISPOSED	
ACCOUNTED DIOI OSTED	ACCONCED	
NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY	
GENERAL DESCRIPTION OF BUSINESS ACTIVITY		
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY -	
	·	
FAIR MARKET VALUE	FAIR MARKET VALUE	
\$2,000 - \$10,000 \qquad \qqqqqqqqqqqqqqqqqqqqqqqqqqqqqqqqqqqq	\$2,000 - \$10,000\$10,001 - \$100,000	
[ \$100,001 - \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000	
NATURE OF INVESTMENT	NATURE OF INVESTMENT	
Stock Other (Describe)	Stock Other (Describe)	
Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499	
O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)	
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:	
, , 10 7 , 19 , 10		
ACQUIRED DISPOSED	ACQUIRED DISPOSED	
	1	
Comments:		